

Kenny's K9

Application for Daycare Services

Client Information

Owner Name:	Address:
City:	Postal Code:
Home Phone:	Cell Phone:
Office Phone:	E-mail:
Alternate Contact Person & Phone number:	
Veterinary Clinic:	

Pet Information - All dogs over 6 months old must be spayed/neutered

Puppy's Name:	Breed:
Is your puppy spayed/neutered? Yes <input type="checkbox"/> No <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
Micro-Chipped? Y <input type="checkbox"/> N <input type="checkbox"/> Tattooed? Y <input type="checkbox"/> N <input type="checkbox"/>	Birthdate:
Are your puppy's shots up to date? Yes <input type="checkbox"/> No <input type="checkbox"/>	DA2PP/CVK (date of last):
Kennel Cough (date of last):	Rabies (date of last):

Health and Behavior - *You are responsible for informing us of any and all incidents of biting and aggression concerning your dog (ie. dog-to-dog, dog – to – human, etc.)*

Does your dog have dietary, activity restrictions? _____ _____
Please provide any additional important information (eg. allergies, bumps or blemishes, medical conditions, skin sensitivities, hip dysphasia) _____ _____
Does your dog liked to be brushed? Yes <input type="checkbox"/> No <input type="checkbox"/> How often do you brush your dog?
Is your puppy comfortable with other dogs? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your puppy comfortable staying in a kennel? Yes <input type="checkbox"/> No <input type="checkbox"/>
How does your dog react to other dogs visiting in your home? _____ _____
Are there any people your dog automatically fears or dislikes? _____ _____
Are there any breeds or kinds of dogs your dog automatically fears or dislikes? _____ _____
Does your dog like / dislike / tolerate children?
How many times per day do you walk your dog?
How does your dog react to puppies?
Has your dog ever growled at someone? Yes <input type="checkbox"/> No <input type="checkbox"/> What were the circumstances? _____ _____
Has your dog ever bitten someone? Yes <input type="checkbox"/> No <input type="checkbox"/> What were the circumstances? _____ _____

Does your dog have any problems in the following areas: Destructive Chewing? _____ Mouthing? _____
--

House Training? _____
 Barking? _____
 Nervousness? _____
 Coming when called? _____
 Ignoring commands? _____
 Eating Feces? _____
 Pulling on leash? _____
 Frightened by noises? _____
 Eating non-food items? _____

Have you tried taking food or toys away from your dog? Yes No If so what happened?

Will your dog share food and toys with other animals? Yes No

Has your dog had formal obedience training? Yes No If yes when and with whom?

Are there any other comments or special requirements (i.e. preferences, feeding schedule, medications, etc.) we should know about?

By signing this form, the undersigned Owner confirms that:

1. All information provided in this Application is accurate and true, to the best of my knowledge;
2. My dog is spayed or neutered, if older than 6 months, or will be spayed or neutered after 6 month of age;
3. My dog's vaccinations are up-to-date, as of the date of this Application, including Bordetella (Kennel Cough), Rabies and DHPPC. I further understand that my dog has to be free from all internal and external parasites. Proof of such vaccinations and parasite treatment will be provided to Kenny's K9 prior to any daycare services, and will be up kept while attending daycare.
4. I am financially responsible for any harm to any person(s), dog(s) and/or property that are determined to have been caused by my dog(s); such determination will be made by the Management of Kenny's K9 after careful review of the circumstances. The Owner's liability and responsibility will extend to cover any and all medical and/or veterinary and/or building repair costs directly resulting from the Owner's dog's behavior.
5. I hereby grant Kenny's K9 permission to seek emergency veterinary care. I further agree that I am financially responsible for all medical treatment my dog(s) receive(s) while attending Kenny's K9.
6. I hereby release and agree to save and hold harmless, Kenny's K9, it's directors, officers, shareholders, employees, assistances, members and agents from any and all liability, claims, suits, actions, loss, injury or damage which I or my dog(s) may sustain or which may be caused in any way by my dog(s). I specifically, without limitation, agree to fully indemnify Kenny's K9 for any and all such liability, claims, suits, actions, losses, injury or damage.
7. If your scheduled day is not cancelled 24 hours beforehand Kenny's K9 reserves the right to charge for that day.
8. Kenny's K9 does not offer boarding services. Daycare days will be charged for all dogs attending daycare.
9. We do take pictures of the daycare dogs and put them on Facebook without compensation to the owners.

 Signature of Dog Owner

 Date